



REC'D 1615

PTO/SB/22 (10-00)

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|   |   |                                      |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
|---|---|--------------------------------------|--|----------|---|----------|--|----------|--|----------|--|----------|---|--|---|--|---|--|--|--|---|--|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>   |   | Docket Number (Optional)<br>PLOVIN-2 |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
|   | In re Application of<br>HEIL et al.                   |                                      |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
|   | Application Number<br>09/757,688                      | Filed<br>January 11, 2001            |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
|   | DROSPIRENONONE FOR HORMONE REPLACEMENT<br>For THERAPY |                                      |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
|   | Group Art Unit<br>1615                                | Examiner<br>L.S. Channavajjala       |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$950.00</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</td> <td></td> </tr> <tr> <td><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u>.</td> <td></td> </tr> </table> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p>Registration number if acting under 37 CFR 1.34(a). _____</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>December 1, 2003<br/>Date</p> <p>Signature</p> <p>Anthony J. Zelano, Reg. No. 27,969<br/>Typed or printed name</p> <p>12/05/2003 MDAMTE1 0000053 09757688</p> <p>01 FC:1253 950.00 0P</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p> |   |                                      | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ _____ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ _____ | <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$950.00 | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ | <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____. |  | <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed. |  | <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. |  | <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. |  | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u> . |  |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$ _____  |                                      |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$ _____  |                                      |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$950.00  |                                      |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$ _____  |                                      |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$ _____  |                                      |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.   |   |                                      |  |          |   |          |  |          |  |          |  |          |   |  |   |  |   |  |  |  |   |  |
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| <b>CERTIFICATION OF MAILING</b>  |  |
| I hereby certify that this correspondence is being deposited with the U.S. Postal Services as First Class Mail in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on: <u>December 1, 2003</u> |  |
| Name:  | Sharon McDaniel  |
| Signature:   | <u>Sharon McDaniel</u><br>Millen, White, Zelano & Branigan, P.C. |